

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Accusation)
Against:)

RICK FRANK POSPISIL, M.D.)

Case No. 800-2015-017176

Physician's and Surgeon's)
Certificate No. G39717)

Respondent)
_____)

DECISION

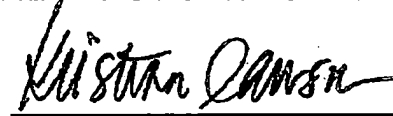
The attached Stipulated Settlement and Disciplinary Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California.

This Decision shall become effective at 5:00 p.m. on November 9, 2018.

IT IS SO ORDERED October 11, 2018.

MEDICAL BOARD OF CALIFORNIA

By: _____



Kristina Lawson, JD, Chair
Panel B

1 XAVIER BECERRA
Attorney General of California
2 E. A. JONES III
Supervising Deputy Attorney General
3 WENDY WIDLUS
Deputy Attorney General
4 State Bar No. 82958
California Department of Justice
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Attorneys for Complainant

8
9 **BEFORE THE**
MEDICAL BOARD OF CALIFORNIA
10 **DEPARTMENT OF CONSUMER AFFAIRS**
STATE OF CALIFORNIA

11
12 In the Matter of the Accusation Against:

13 **Rick Frank Pospisil, M.D.**
5196 Hill Rd E, Suite 204
14 **Lakeport, CA 95453-6360**

15 **Physician's and Surgeon's Certificate**
No. G 39717,

16
17 Respondent.

Case No. 800-2015-017176

OAH No. 2018030078

18
19 **STIPULATED SETTLEMENT AND**
DISCIPLINARY ORDER

20 The parties hereby agree to the following Stipulated Settlement and Disciplinary Order which will
21 be submitted to the Board for approval and adoption as the final disposition of the Accusation.

22 **PARTIES**

23 1. Kimberly Kirchmeyer (Complainant) is the Executive Director of the Medical Board
24 of California (Board). She brought this action solely in her official capacity and is represented in
25 this matter by Xavier Becerra, Attorney General of the State of California, by Wendy Widlus,
Deputy Attorney General.

26 2. Respondent Rick Frank Pospisil, M.D. (Respondent) is represented in this proceeding
27 by attorney Raymond J. McMahon, Esq., whose address is: 5440 Trabuco Road, Irvine,
28 California 92620.

3. On or about July 2, 1979, the Board issued Physician's and Surgeon's Certificate No. G 39717 Respondent. The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought in Accusation No. 800-2015-017176, and will expire on September 30, 2020, unless renewed.

JURISDICTION

4. Accusation No. 800-2015-017176 was filed before the Board, and is currently pending against Respondent. The Accusation and all other statutorily required documents were properly served on Respondent on February 9, 2018. Respondent timely filed his Notice of Defense contesting the Accusation.

5. A copy of Accusation No. 800-2015-017176 is attached as exhibit A and incorporated herein by reference.

ADVISEMENT AND WAIVERS

6. Respondent has carefully read, fully discussed with counsel, and understands the charges and allegations in Accusation No. 800-2015-017176. Respondent has also carefully read, fully discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary Order.

7. Respondent is fully aware of his legal rights in this matter, including the right to a hearing on the charges and allegations in the Accusation; the right to confront and cross-examine the witnesses against him; the right to present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the production of documents; the right to reconsideration and court review of an adverse decision; and all other rights accorded by the California Administrative Procedure Act and other applicable laws.

8. Respondent voluntarily, knowingly, and intelligently waives and gives up each and every right set forth above.

CULPABILITY

9. Respondent understands and agrees that the charges and allegations in Accusation No. 800-2015-017176, if proven at a hearing, constitute cause for imposing discipline upon his Physician's and Surgeon's Certificate Number G 39717.

10. For the purpose of resolving the Amended Accusation without the expense and uncertainty of further proceedings, Respondent does not contest that, at an administrative hearing, complainant could establish a *prima facie* case with respect to the charges and allegations contained in Accusation No. 800-2015-017176.

11. Respondent agrees that his Physician's and Surgeon's Certificate is subject to discipline and he agrees to be bound by the Board's imposition of discipline as set forth in the Disciplinary Order below.

CONTINGENCY

12. This stipulation shall be subject to approval by the Medical Board of California. Respondent understands and agrees that counsel for Complainant and the staff of the Medical Board of California may communicate directly with the Board regarding this stipulation and settlement, without notice to or participation by Respondent or his counsel. By signing the stipulation, Respondent understands and agrees that he may not withdraw his agreement or seek to rescind the stipulation prior to the time the Board considers and acts upon it. If the Board fails to adopt this stipulation as its Decision and Order, the Stipulated Settlement and Disciplinary Order shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action between the parties, and the Board shall not be disqualified from further action by having considered this matter.

13. The parties understand and agree that Portable Document Format (PDF) and facsimile copies of this Stipulated Settlement and Disciplinary Order, including PDF and facsimile signatures thereto, shall have the same force and effect as the originals.

14. In consideration of the foregoing admissions and stipulations, the parties agree that the Board may, without further notice or formal proceeding, issue and enter the following Disciplinary Order:

DISCIPLINARY ORDER

IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. G 39717 issued to Respondent Rick Frank Pospisil, M.D. is hereby publically reprimanded.

1. PUBLIC REPRIMAND. Respondent is publically reprimanded as follows:

1 This Public Reprimand is issued pursuant to Code section 2227 as a result of the conduct by
2 Respondent as set forth in the Accusation relating to the care and treatment of one patient alleging
3 repeated acts of negligence pursuant to Code section 2234, subdivision (c) and unprofessional
4 conduct pursuant to Code sections 2266 and 2234 by his failure to keep adequate and accurate
5 medical records. Respondent is a Board Certified orthopedic surgeon who treated a single patient
6 with a lengthy history of knee pain and lack of motion from a work incident resulting in a torn
7 meniscus. The patient underwent several surgeries by other orthopedic surgeons and was referred
8 to Respondent for knee replacement surgery.

9 Respondent prepared and submitted his report and bill for the patient's initial visit to her
10 Worker's Compensation carrier and used a billing code which requires a comprehensive knee
11 examination of a patient. A patient's physician must engage in medical decision making
12 regarding a patient's medical care and document the process of that decision making to permit
13 payment under the billing code utilized by Respondent. During the patient's initial visit with
14 Respondent he failed to adequately document medical decision making which would have
15 included the performance of a comprehensive physical examination of the patient's knee, a
16 review of previous x-rays, and ordering of additional x-rays.

17 Respondent performed a total knee replacement and following surgery failed to document
18 orders for post surgery x-rays of the patient's knee or discussions with the patient of rehabilitation
19 options.

20 The patient complained of continuing pain during six follow-up visits with Respondent.
21 Respondent failed to document the patient's failure to progress throughout her rehabilitation
22 treatments or investigation of different treatment options to address the patient's ongoing
23 complaints. Respondent placed the patient under anesthesia and manipulated her knee to treat her
24 ongoing pain without documentation of other treatment options and adequate informed consent.

25 **IT IS FURTHER ORDERED** that Respondent comply with the following:

26 2. PROFESSIONALISM PROGRAM (Ethics Course) Within 60 calendar days of
27 the effective date of this Decision Respondent shall enroll in a professionalism program, that
28 meets the requirements of Title 16, California Code of Regulations (CCR) section 1358.1.

1 Respondent shall participate in and successfully complete that program. Respondent shall
2 provide any information and documents that the program may deem pertinent. Respondent shall
3 successfully complete the classroom component of the program not later than six (6) months after
4 respondent's initial enrollment, and the longitudinal component of the program not later than the
5 time specified by the program, but no later than one (1) year after attending the classroom
6 component. The professionalism program shall be at Respondent's expense and shall be in
7 addition to the Continuing Medical Education (CME) requirements for renewal of licensure.

8 A professionalism program taken after the acts that gave rise to the charges in the
9 Accusation, but prior to the effective date of the Decision may, in the sole discretion of the Board
10 or its designee, be accepted towards the fulfillment of this condition if the program would have
11 been approved by the Board or its designee had the program been taken after the effective date of
12 this Decision.

13 Respondent shall submit a certification of successful completion to the Board or its
14 designee not later than 15 calendar days after successfully completing the course, or not later than
15 15 calendar days after the effective date of the Decision, whichever is later.

16 3. MEDICAL RECORD KEEPING COURSE Within 60 calendar days of the
17 effective date of this Decision, Respondent shall enroll in a course in medical record keeping, at
18 Respondent's expense, approved in advance by the Board or its designee. Failure to successfully
19 complete the course within 6 months of the effective date of this Order is a material violation of
20 this Order.

21 A medical record keeping course taken after the acts that gave rise to the charges in the
22 Amended Accusation, but prior to the effective date of the Decision may, in the sole discretion of
23 the Board or its designee, be accepted towards the fulfillment of this condition if the course would
24 have been approved by the Board or its designee had the course been taken after the effective date
25 of this Decision.

26 Respondent shall submit a certification of successful completion to the Board or its
27 designee not later than 15 calendar days after successfully completing the course, or not later than
28 15 calendar days after the effective date of the Decision, whichever is later.

1 4. VIOLATION OF ORDER A material violation of this Order constitutes
2 unprofessional conduct.

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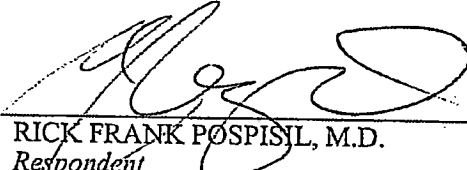
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ACCEPTANCE


1 I have carefully read the above Stipulated Settlement and Disciplinary Order and have fully
2 discussed it with my attorney, Raymond J. McMahon, Esq. I understand the stipulation and the
3 effect it will have on my Physician's and Surgeon's Certificate. I enter into this Stipulated
4 Settlement and Disciplinary Order voluntarily, knowingly, and intelligently, and agree to be
5 bound by the Decision and Order of the Medical Board of California.

6
7 DATED: 8-9-18


8 RICK FRANK POSPISIL, M.D.
Respondent

9 I have read and fully discussed with Respondent RICK FRANK POSPISIL, M.D. the terms
10 and conditions and other matters contained in the above Stipulated Settlement and Disciplinary
11 Order. I approve its form and content.

12 DATED: August 10, 2018


13 RAYMOND J. MCMAHON, ESQ.
14 Attorney for Respondent


15 ENDORSEMENT

16 The foregoing Stipulated Settlement and Disciplinary Order is hereby respectfully
17 submitted for consideration by the Medical Board of California.

18
19 Dated:

Respectfully submitted,

20 XAVIER BECERRA
21 Attorney General of California
22 E. A. JONES III
23 Supervising Deputy Attorney General


24 WENDY WIDLUS
25 Deputy Attorney General
26 Attorneys for Complainant

27 LA2017606368
Stipulated Settlement and Disciplinary Order .pdf.docx

Exhibit A

Accusation No. 800-2015-017176

XAVIER BECERRA
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Attorneys for Complainant

BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation Against:

Case No. 800-2015-017176

Rick Frank Pospisil, M.D.
18800 Main Street, Suite 107
Huntington Beach, CA 92648

A C C U S A T I O N

Physician's and Surgeon's Certificate
No. G 39717,

Respondent.

Complainant alleges:

PARTIES

1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official capacity as the Executive Director of the Medical Board of California, Department of Consumer Affairs (Board).

2. On or about July 2, 1979, the Medical Board issued Physician's and Surgeon's Certificate Number G 39717 to Rick Frank Pospisil, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought herein and will expire on September 30, 2018, unless renewed.

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JURISDICTION

3. This Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.

4. Section 2229 of the Code states:

“(a) Protection of the public shall be the highest priority for the Division of Medical Quality,¹ the California Board of Podiatric Medicine, and administrative law judges of the Medical Quality Hearing Panel in exercising their disciplinary authority.

“(b) In exercising his or her disciplinary authority an administrative law judge of the Medical Quality Hearing Panel, the division, or the California Board of Podiatric Medicine, shall, wherever possible, take action that is calculated to aid in the rehabilitation of the licensee, or where, due to a lack of continuing education or other reasons, restriction on scope of practice is indicated, to order restrictions as are indicated by the evidence.

“(c) It is the intent of the Legislature that the division, the California Board of Podiatric Medicine, and the enforcement program shall seek out those licensees who have demonstrated deficiencies in competency and then take those actions as are indicated, with priority given to those measures, including further education, restrictions from practice, or other means, that will remove those deficiencies. Where rehabilitation and protection are inconsistent, protection shall be paramount.”

5. Section 2227 of the Code states:

“(a) A licensee whose matter has been heard by an administrative law judge of the Medical Quality Hearing Panel as designated in Section 11371 of the Government Code, or whose default has been entered, and who is found guilty, or who has entered into a stipulation for disciplinary action with the board, may, in accordance with the provisions of this chapter:

“(1) Have his or her license revoked upon order of the board.

“(2) Have his or her right to practice suspended for a period not to exceed one year upon

¹ California Business and Professions Code section 2002, as amended and effective January 1, 2008, provides that, unless otherwise expressly provided, the term "board" as used in the State Medical Practice Act (Cal. Bus. & Prof. Code, §§§§ 2000, et seq.) means the "Medical Board of California," and references to the "Division of Medical Quality" and "Division of Licensing" in the Act or any other provision of law shall be deemed to refer to the Board.

1 order of the board.

2 “(3) Be placed on probation and be required to pay the costs of probation monitoring upon
3 order of the board.

4 “(4) Be publicly reprimanded by the board. The public reprimand may include a
5 requirement that the licensee complete relevant educational courses approved by the board.

6 “(5) Have any other action taken in relation to discipline as part of an order of probation, as
7 the board or an administrative law judge may deem proper.

8 “(b) Any matter heard pursuant to subdivision (a), except for warning letters, medical
9 review or advisory conferences, professional competency examinations, continuing education
10 activities, and cost reimbursement associated therewith that are agreed to with the board and
11 successfully completed by the licensee, or other matters made confidential or privileged by
12 existing law, is deemed public, and shall be made available to the public by the board pursuant to
13 Section 803.1.”

14 6. Section 2234 of the Code, states:

15 “The board shall take action against any licensee who is charged with unprofessional
16 conduct. In addition to other provisions of this article, unprofessional conduct includes, but is not
17 limited to, the following:

18 “(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the
19 violation of, or conspiring to violate any provision of this chapter.

20 “(b) Gross negligence.

21 “(c) Repeated negligent acts. To be repeated, there must be two or more negligent acts or
22 omissions. An initial negligent act or omission followed by a separate and distinct departure from
23 the applicable standard of care shall constitute repeated negligent acts.

24 “(1) An initial negligent diagnosis followed by an act or omission medically appropriate
25 for that negligent diagnosis of the patient shall constitute a single negligent act.

26 “(2) When the standard of care requires a change in the diagnosis, act, or omission that
27 constitutes the negligent act described in paragraph (1), including, but not limited to, a
28 reevaluation of the diagnosis or a change in treatment, and the licensee's conduct departs from the

1 applicable standard of care, each departure constitutes a separate and distinct breach of the
2 standard of care.

3 “(d) Incompetence.

4 “(e) The commission of any act involving dishonesty or corruption which is substantially
5 related to the qualifications, functions, or duties of a physician and surgeon.

6 “(f) Any action or conduct which would have warranted the denial of a certificate.

7 “(g) The practice of medicine from this state into another state or country without meeting
8 the legal requirements of that state or country for the practice of medicine. Section 2314 shall not
9 apply to this subdivision. This subdivision shall become operative upon the implementation of the
10 proposed registration program described in Section 2052.5.

11 “(h) The repeated failure by a certificate holder, in the absence of good cause, to attend and
12 participate in an interview by the board. This subdivision shall only apply to a certificate holder
13 who is the subject of an investigation by the board.”

14 7. Section 2266 of the Code states: The failure of a physician and surgeon to maintain
15 adequate and accurate records relating to the provision of services to their patients constitutes
16 unprofessional conduct.

17 8. Section 2261 of the Code states: “Knowingly making or signing any certificate or
18 other document directly or indirectly related to the practice of medicine or podiatry which falsely
19 represents the existence or nonexistence of a state of facts, constitutes unprofessional conduct.”

20 9. Section 2262 of the Code states:

21 “Altering or modifying the medical record of any person, with fraudulent intent, or creating
22 any false medical record, with fraudulent intent, constitutes unprofessional conduct.”

23 **Facts**

24 10. Respondent is a Board Certified orthopedic surgeon.

25 11. Patient A² was a 39-year-old female patient with a lengthy history of pain and lack of

26
27 ²The name of the patient and any witnesses are abbreviated to protect privacy rights. The names will be
28 provided to Respondent upon written request for discovery.

1 motion in her left knee from a 1999 work incident which resulted in a torn meniscus.³ The patient
2 underwent surgery performed by another orthopedic surgeon to repair the meniscus, but
3 continued to experience pain.

4 12. In 2006 the patient went to a different orthopedic surgeon who performed surgery on
5 the patient's ACL.⁴ Following surgery the orthopedic surgeon stated in his opinion the patient
6 would be required to undergo knee replacement surgery in several years.

7 13. In 2011 the patient's primary care orthopedist examined her knee and suggested that
8 she undergo a total knee replacement. The patient's primary care orthopedist referred the patient
9 to Respondent to perform the knee replacement surgery.

10 14. During the patient's initial visit with Respondent on April 3, 2012, Respondent failed
11 to adequately document performance of a comprehensive physical examination of the patient's
12 knee.

13 15. During the patient's initial visit with Respondent he failed to document a review of
14 any previous x-rays of the patient's knee taken by other physicians.

15 16. During the patient's initial visit with Respondent he failed to order additional x-rays
16 of the patient's knee for his review.

17 17. After the patient's initial visit Respondent prepared his report of the initial patient
18 visit. In that report Respondent stated, "Review of the history with the patient, physical
19 examination, interpretation of x-rays, review of medical records, and dictation/review of final
20 report have been performed by the undersigned."

21 18. Respondent prepared and submitted his report of and bill for the patient's initial visit
22 to the patient's Worker's Compensation carrier using CPT⁵ code 99244.

23 19. A physician must complete a comprehensive knee examination of a patient to permit
24 payment under Worker's Compensation carrier CPT code 99244.

25 ³ The meniscus is a piece of C-shaped cartilage positioned on top of the tibia bone of the knee.

26 ⁴ The anterior cruciate ligament (ACL) is one of the four ligaments in the knee that provides stabilization for
27 the knee joint.

28 ⁵ CPT is the abbreviation for Current Procedural Terminology, a medical code set used to report medical,
surgical, and diagnostic procedures and services to entities such as physicians, health insurance companies and
accreditation organizations.

20. A patient's physician must engage in medical decision making regarding a patient's medical care and document the process of that decision making to permit payment under Worker's Compensation carrier CPT code 99244.

21. On May 14, 2012, Respondent performed a total knee replacement on the patient's left knee. Following surgery Respondent failed to document any discussions of rehabilitation options with the patient.

22. Following surgery Respondent failed to document orders for x-rays of the patient's knee.

23. Following surgery Respondent saw the patient during follow-up visits on August 7, 2012, August 21, 2012, October 2, 2012, October 16, 2012, November 13, 2012, January 8, 2013. The patient complained of continuing pain during the course of those visits. Respondent's records for the patient's follow-up visits do not contain information regarding investigation of different treatment options to address the patient's ongoing complaints, including the failure to progress in rehabilitation.

24. On July 27, 2012, without documentation of any other treatment options and adequate patient informed consent, Respondent placed the patient under anesthesia and manipulated her left knee to treat her continuing complaints of pain.

FIRST CAUSE FOR DISCIPLINE

(Repeated Negligent Acts)

(Bus. & Prof. Code, § 2234, subd. (c))

25. Respondent Rick Frank Pospisil, M.D. is subject to disciplinary action under section Code section 2234, subdivision (c), in that he was repeatedly negligent in the care and treatment of a single patient. The circumstances are as follows:

26. The facts and circumstances alleged in paragraphs 10 through 24 are incorporated here as if fully set forth.

27. By the following conduct, taken individually or collectively, or in any combination thereof, Respondent was repeatedly negligent in his care and treatment of patient A:

28. Respondent was negligent in his care and treatment of patient A when he failed to

1 adequately document his performance of a comprehensive preoperative physical knee
2 examination of the patient.

3 29. Respondent was negligent in his care and treatment of patient A when during the
4 patient's initial visit he failed to adequately document a review of any previous x-rays of the
5 patient's knee taken by other physicians.

6 30. Respondent was negligent in his care and treatment of patient A when during the
7 patient's initial visit he failed to order and/or document the ordering of additional x-rays of the
8 patient's knee for his review.

9 31. Respondent was negligent in his care and treatment of patient A when following
10 surgery, he failed to order x-rays of the patient's knee.

11 32. Respondent was negligent in his care and treatment of patient A when following
12 surgery, he failed to adequately document his records for the patient's follow-up visits regarding
13 his failure to investigate different treatment options to address the patient's ongoing complaints
14 including the failure to progress in rehabilitation.

15 33. Respondent was negligent in his care and treatment of patient A when following
16 surgery, he failed to adequately document his records for the patient's follow-up visits regarding
17 his decision and patient's consent, to place the patient under anesthesia and manipulate her left
18 knee to treat her continuing complaints of pain.

19 SECOND CAUSE FOR DISCIPLINE

20 (False Documents)

21 (Bus. & Prof. Code, § 2261)

22 34. Respondent Rick Frank Pospisil, M.D. is further subject to disciplinary action under
23 sections 2227 and 2234, as defined by section 2261 of the Code, in that he knowingly made or
24 signed a document directly related to the practice of medicine which falsely represented the
25 existence of a state of facts, as set forth in paragraphs 19 and 20, above, which are incorporated
26 herein by reference.

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1 **THIRD CAUSE FOR DISCIPLINE**

2 (Creation of False Medical Record)

3 (Bus. & Prof. Code, § 2262)

4 35. Respondent Rick Frank Pospisil, M.D. is further subject to disciplinary action under
5 sections 2227 and 2234 as defined by section 2262 of the Code, in that he altered or modified the
6 medical record of patient A, with fraudulent intent, or created any false medical record, with
7 fraudulent intent, as set forth in paragraphs 19 and 20, above, which are incorporated herein by
8 reference.

9 **FOURTH CAUSE FOR DISCIPLINE**

10 (Dishonesty or Corruption)

11 (Bus. & Prof. Code, § 2234, subd. (e))

12 36. Respondent Rick Frank Pospisil, M.D. is further subject to disciplinary action under
13 sections 2227 and 2234 as defined by section 2234, subdivision (e), of the Code, in that
14 Respondent committed an act or acts of dishonesty or corruption as set forth in paragraphs 17 and
15 18 above, which are incorporated herein by reference.

16 **FIFTH CAUSE FOR DISCIPLINE**

17 (Inadequate Record Keeping)

18 (Bus. & Prof. Code, § 2266)

19 37. Respondent is subject to disciplinary action under section 2266 of the Code in that he
20 failed to keep adequate and accurate medical records relating to the provision of services to
21 patient A, thereby committing unprofessional conduct. The circumstances are as follows:

22 38. The facts and circumstances of the First Cause for Discipline are incorporated by
23 reference as if set forth in full herein.

24 **SIXTH CAUSE FOR DISCIPLINE**

25 (Unprofessional Conduct)

26 (Bus. & Prof. Code, § 2234)

27 39. Respondent is subject to disciplinary action under section 2234 of the Code in that
28 she engaged in unprofessional conduct. The circumstances are as follows:

40. The facts and circumstances set forth in paragraphs 10 through 39 are incorporated by reference as if set forth in full herein.

PRAAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Medical Board of California issue a decision:

1. Revoking or suspending Physician's and Surgeon's Certificate Number G 39717,
issued to Rick Frank Pospisil, M.D.;

2. Revoking, suspending or denying approval of Rick Frank Pospisil, M.D.'s authority to supervise physician assistants and advanced practice nurses;

3. Ordering Rick Frank Pospisil, M.D., if placed on probation, to pay the Board the costs of probation monitoring; and

4. Taking such other and further action as deemed necessary and proper.

DATED: February 9, 2018

KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

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